(10 to 12 grs.), slight pain and heaviness in the stomach: the pain is, however, not always present; the appetite is usually increased; it is remarkable how soon after the taking of the iodide the desire for food arises.

The following days these symptoms diminish or disappear. The second day, the dose being 1.00 gramme (upwards of 15 grs.), heaviness of the head, colic,

and diarrhæa.

2. On the Urinary Secretion.—This is more abundant the first day, that is, the patient passes more than he drinks. This symptom is almost constant. The urine is clear and transparent—the patients urinate more by night than by day. Sometimes, however, the urine is not increased.

3. Eruption.—The most frequent is the pustule of acne, which shows itself from the end of the first to the second day. It most frequently occurs on the face; it does not usually last as long as the treatment, that is, it disappears in 15 or 20

days. Ecthyma more rarely. Neither papular erythema nor purpura hemorrhagica was observed; in one case an eczema impetiginoides was seen.

4. Pruritus very seldom observed.

5. Conjunctivitis.—The conjunctiva was sometimes influenced when the iodide was given in doses of 1 to 2 grms. Both conjunctivas may become inflamed. It principally occurred during the first days of the use of the medicine, and was characterized by general vascularity and chemosis.

6. Menstruation.—Although this medicine is spoken of by most authors as an emmenagogue, they often remarked a decrease in the quantity of the menstrual fluid. Once the discharge re-appeared a week after the menstrual period; but

this may have been only a coincidence.

7. Discharges from the uterine cavity were not perceptibly increased.

8. As invariable and immediate effects, the authors never once failed to see the decrease or suspension of the pains of the bones after the first or second day of treatment. No other antisyphilitic agent possesses so prompt and constant an action.

9. Salivation.—This is a rare symptom in women; it was seen only once. M. Ricord observed it more frequently, perhaps, because he gave the medicine in larger doses. The saliva remained thin, the mucous membrane of the mouth uninflamed and unaltered; the salivary glands not swollen—a true hypersecretion, without peculiar smell.

10. Effects on the Circulation—none.

- 11. Accidents produced by the Iodide.—The authors object to giving the iodide in such large doses as some physicians administer it. M. Biechy relates two cases in which serious accidents were produced. In the first, the patient being benefited by doses of three-fourths of a grain, gradually increased to fifteen grains, thought by doubling the dose to double the advantage received. The first three days he suffered from general uneasiness and intense headache; the fourth day he was affected in his lower limbs, his sight disturbed, and his hearing almost gone; on trying to walk, his legs gave way under him, and his arms had lost all power. Finally, having taken a few steps, he fell unconscious; on coming to himself, he remained in a state of languor and weakness, which did not disappear for several days after the suspension of the medicine. In the second case, death ensued; but it was doubtful if it could be attributed to the iodide.—Month. Journ., July, 1848, from Gaz. Méd. de Paris.
- 12. Action of Chloroform.—M. MALGAIONE has made to the French Academy of Medicine a very interesting report on chloroform. The following are his conclusions:—
- 1. Chloroform is a most energetic substance, which may be classed with poisons, and should be only used by experienced persons. 2. It is liable to cause irritation of the air passages, and should be employed with reserve in persons suffering from the lungs or heart. 3. Chloroform pussesses a special toxic action, which has been profited by, and is carried as far as the production of insensibility, but which may occasion death if improperly prolonged. 4. Certain modes of exhibition increase the perils inherent to chloroform; thus asphyxia may be brought on, if the auæsthetic vapours are not sufficiently mixed with air, or if respiration is not performed with freedom. 5. All these dangers may be obviated if the sur-

geon, in the first place, ascertains that the respiratory organs and the circulating system are sound, if a sufficient quantity of air is admitted into the lungs, together with the chloroform; and, finally, if the inhalation is suspended immediately upon the production of unconsciousness.

M. Amussat maintained that although a free ingress of air took place into the lungs at the same time with chloroform vapours, the colour of the arterial blood became darker as soon as the insensibility was produced. M. A. observes that the effects of ether or chloroform were to be particularly dreaded when patients had lost much blood.—Med. Times, Nov. 25.

These conclusions of M. Malgaigne have been attacked by M. Guerin, who

proposed to substitute for them the following:-

1. That chloroform, a most energetic agent, was susceptible, in experienced hands, of rendering signal service, but exhibited in expressive doses, or for too long a time, or by improper methods, it might become a direct cause of death.

2. That circumstances, peculiar conditions existed, not yet altogether pointed out with precision, but of which certain instances demonstrated peremptorily the possibility, which increased the toxic properties of chloroform, and which neces-

sitated the greatest caution in its use.

- 3. That in M. Gorre's case, it was the opinion of the Academy that chloroform had probably occasioned death, although that agent had been employed in a dose and in a manner which experiment had almost universally shown to be innocuous; and that the rapidity, and exceptional intensity of the intoxication, had been in that instance favoured by individual circumstances, which the surgeon could not possibly foresee.—Med. Times, Dec. 2, 1848.
- 13. Administration of Mercury in small Doses.—Mr. Hancock stated to the Medical Society of London that he had adopted the plan recommended by some French surgeons of giving calomel in very small doses,—a twentieth part of a grain every hour day and night, until the specific effect of the medicine was produced,—with two patients in Charing cross Hospital, both of whom had been admitted with inflammation of the testicle, consequent upon gonorrhæa. In one case, he gave a twentieth of a grain of calomel every hour; in the other, a twentieth of a grain every three hours. In the first case, the patient was salivated in thirty-six hours; in the second case, in forty-eight hours. The advantage of this mode of producing ptyalism was, that the effect was milder and more controllable than where larger doses were administered; the bowels were also unaffected. The mode of its administration was as follows:—Calomel, one grain; confection of opium, a scruple; divide in twenty pills—one every hour. In the cases related, the effects of this medicine were most decided.—Lancet, Oct. 7, 1848.
- 14. Narcotic Principle in Indian Hemp, a Peculiar Resin. By Messrs. T. & H. Smith, Edinburgh.—The researches of these chemists show that the remarkable action of Indian hemp on the animal economy depends on the presence of a particular resin, which is soluble in alcohol, and from which it is precipitated by water in the form of a white powdery substance.

This resin, obtained by means of a process described by the authors, is of a yellowish-brown colour. It has a hot, pungent, balsamic taste. Heated on a plate of platinum, it melts and burns away without leaving any residuum, diffusing a

strong aromatic odour.

Messrs. Smith found, by experiments made on themselves, that this substance possesses the soothing and hypnotic properties of morphia. In the dose of two-thirds of one grain English, it is a powerful narcotic; in the dose of one grain, it produces complete intoxication.

Under its influence the pupil is contracted. Its action is very persistent; but it does not appear, like opium, to have the inconvenience of producing constipation.

To this resin, of which the plant contains from six to seven per cent., the various preparations used in the East, as haschisch, &c., owe their well-known properties.—Edin. Med. and Surg. Journ., Oct. 1848, from Pharmaceutical Journal.

15. Camphor and Chloroform Mixture. By T. and H. SMITH. (Monthly Journ. & Retrosp. of the Medical Sciences, Nov. 1848.)—There is great difficulty, or rather